

AO 440 (Rev. 8/01) Summons in a Civil Action

UNITED STATES DISTRICT COURT

Southern

District of

Indiana

CMG WORLDWIDE, INC., an Indiana
Corporation and MARILYN MONROE, LLC, a
Delaware Limited Liability Company

SUMMONS IN A CIVIL ACTION

V.

BRADFORD LICENSING ASSOCIATES,
THE SHAW FAMILY ARCHIVES, LTD., a
New York Corporation, and
JAMES E. DOUGHERTY

CASE NUMBER:

1:05-cv-0423-DFH-WTL

TO: (Name and address of Defendant)

James E. Dougherty
P.O. Box 103
Sabattus, ME 04280

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Jonathan G. Polak
Dann Pecar Newman & Kleiman
One American Square, Box 82008
Indianapolis, IN 46282

an answer to the complaint which is served on you with this summons, within 23 days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

CLERK

CLERK

MAR 23 2005

DATE

(By) DEPUTY CLERK

AO 440 (Rev. 10/93) Summons in a Civil Action

(By) DEPUTY CLERK

AO 440 (Rev. 10/93) Summons in a Civil Action

RETURN OF SERVICE

Service of the Summons and complaint was made by me ⁽¹⁾	DATE March 31, 2005
---	------------------------

NAME OF SERVER (<i>PRINT</i>) Jonathan G. Polak	TITLE Attorney
--	-------------------

Check one box below to indicate appropriate method of service

☐ Served personally upon the defendant. Place where _____

☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein

Name of person with whom the summons and complaint _____

☐ Returned _____

X Other Served on Defendant via Certified Mail, Return Receipt Requested. Receipt was signed and returned on March 28, 2005.

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL
--------	----------	-------

DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct

Executed March 31, 2005
Date


Signature of Server

DANN PECAR NEWMAN & KLEIMAN, P.C.
2300 One American Square, Box 82008
Indianapolis, IN 46282

Address of Server

UNITED STATES POSTAL SERVICE

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Jonathan G. Polak
DANN PECAR NEWMAN & KLEIMAN, P.C.
2300 One American Square
Box 82008
Indianapolis, IN 46282

ONE / Bradford / Street

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> <i>Gary A. Woods</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>James F. Dougherty P.O. Box 103 Sabattus, ME 04280</p>		<p>B. Received by (Printed Name) <i>Gary A. Woods</i></p> <p>C. Date of Delivery <i>3-28-05</i></p>	
<p>2. Article Number (Transfer from service label)</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>7004 2510 0001 4713 7578</p>		<p>PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540</p>	